Employee Benefits Handbook
2016

FOR DETAILED BENEFIT INFORMATION: www.oe.clermontcountyohio.gov

or

Visit the County Intranet SharePoint / Human Resources site.

The benefits illustrated are available to the majority of Clermont County employees and are based on policies approved by the Board of County Commissioners. If you are employed within the office of another Elected Official or part of a collective bargaining unit (union), some of the information herein may not apply to you due to specific conditions included in your individual agreement and/or department policies. Refer to your department head or collective bargaining agreement for specific information.

The Clermont Board of County Commissioners is pleased to be able to offer you and your family the opportunity to participate in a comprehensive benefits package which provides several benefits to you at no cost, while you share in the cost of others. Clermont County's contribution to your benefits represents a significant part of your total compensation.

TABLE OF CONTENTS:

Eligibility 3

New Enrollments 4

Open Enrollment 4

Changing Your Benefit Elections Mid-Year 4

Termination of Benefits / Change in Status 4

Pre-Tax Deductions 4

Benefit Plans:

1) Medical 5
2) Dental 6
3) Vision 6
4) FSA-Health (Flexible Spending Account-Health) 6
5) FSA-Dependent Care (Flexible Spending Account for daycare expenses) 6
6) HSA (Health Savings Account) 6
7) Employee Life and AD&D Insurance (Accidental Death & Disability) 7
8) Voluntary Life and AD&D Insurance 7
9) County Provided Long Term Disability Insurance (LTD) 7
10) Voluntary STD & LTD Insurance (Short & Long Term Disability) 7

Other Benefits:

11) Vacation Schedule 8
12) Holiday Schedule 8
13) Personal Day 8
14) Earned Personal Day 8
15) Sick Leave 8
16) Donated Leave 8
17) Other Leave 8
18) Family Medical Leave Act (FMLA) 8
19) EAP (Employee Assistance Program) 9
20) Tuition Assistance 9
21) Retirement Benefits 9
22) Workers Compensation / Wage Continuation 9
23) COBRA Rights Notice 9

WHO IS ELIGIBLE?

Employees: Group health insurance is available to all permanent, full-time employees and to persons elected or appointed to elected office, unless otherwise mandated by the **Patient Protection and Affordable Care Act** (PPACA).

Dependents: Your dependents are eligible for coverage if you elect to enroll in the plans. Generally, your eligible dependents include:

- Your legal spouse (per Federal Guidelines)
- Medical: Your children up to the age of 26.
- Dental, Vision & Child Life Ins: Your children up to the age of 19; up to 25 if full-time student.
- Children, disabled prior to age 19, may also qualify for benefits *(see eligibility requirements below)*.

IMPORTANT NOTICE ABOUT DEPENDENT COVERAGE:
According to IRS rules, you must notify Clermont County of any change in your dependent's eligibility status within 30 days of the change. Failure to report the change within the 30 day period can result in the loss of your dependent's benefits and/or COBRA Rights for continuing coverage.

Additionally, an employee could be subject to imputed income if the dependent child does not meet the Qualifying Child definitions listed below:

A Qualifying Child is one who:

- Is related to the taxpayer – ex: natural child, adopted or foster child, step-child, legal guardianship, and….
- Is under age 26 (under 25 for non-medical plans); or is permanently and totally disabled, and…..
- Does not provide over half of his/her own support, and
- Has the same principal residence as the taxpayer for more than half the year.

Documentation:
If you add a new dependent (someone not currently covered), you must provide documentation showing he or she is an eligible dependent. Examples of required documentation:

- Spouse: Official marriage certificate or license.
- Child: Birth certificate or legal documentation (adoption, guardianship, support order, etc.)
- Disabled child (disabled prior to becoming ineligible for coverage due to age and also over benefit age limit): Certificate of disability issued by Social Security.
- 19-25yrs (child): full-time Student verification* when adding to dental, vision or child life.

Dependent Child Coverage ends at the end of the month* in which the child:

1. Medical: reaches age 26.
2. Dental, Vision, Child Life:
   - Reaches age 19; or age 25 if a full-time student (supporting documentation is required**);
   - Graduates; withdraws from school; reduces attendance below 12 credit hours.
   - No longer meets the IRS definition of a "Qualifying Child" *(see definition above)*

It is the employee's responsibility to notify Clermont County when their covered dependent is no longer eligible for coverage (within 30 days of the event).

***Full-time student documentation must include: name of accredited school; list the semester/quarter; and provide enough information to show that the child is enrolled as a full-time student (12 or more credit hours).*

ENROLLING FOR COVERAGE:

IMPORTANT: All employees are required to complete the enrollment process electronically via the Employee Self-Serve portal (ESS).

New Hires: Coverage begins on the first day of the month following a 60 day waiting period from your hire date. Ex: If you were hired on 2/1/2016, your benefits would be effective 4/1/2016 (this is your "eligibility date"); however, if you were hired on 2/12/2016, your benefits eligibility date would be 5/1/2016.

- 30 days prior to your eligibility date you will receive an email notification that the system is set up to accept your elections. The email will include directions to log into ESS.
- You have 30 days from your eligibility date to elect your benefits*; however, it is recommended that you elect coverage ASAP to avoid delays with ID cards, coverage and to avoid possible payroll back-deductions.*

Newly Eligible: Follow the instructions given for 'New Hires' above, however, eligibility is as follows:

- Employees moving from part-time to full-time: Coverage begins on the first day of the month following change in status, provided that the employee has worked at least 60 days.
- Return from disability or military leave: Coverage begins immediately.

Open Enrollment: The County holds an "open enrollment" period at the end of every calendar year to allow employees to make **changes to their medical, dental, vision, FSA, and/or HSA elections**.

During the 2016 open enrollment: employees may pick up or increase their existing voluntary life coverage by up to $20,000 (but not more than a total of $150,000 for employee and/or $50,000 for spouse) and increase existing child life coverage up to $20,000 without needing to submit medical information.
(See the voluntary life section for further details).

All benefit eligible employees are required to complete the open enrollment benefit selection process, even if waiving all coverage.

Open enrollment benefit changes/elections become **effective on January 1st of the following year**.

Mid-Year Changes Due to a Qualifying Event (QE): A QE is a circumstance which affects your family status or income, such as marriage, birth, adoption, legal separation, divorce, death, loss of other coverage, newly available coverage, etc. In most instances, qualifying events must be reported by you within 30 days of the actual event (Medicare/Medicaid/Healthy-Start eligibility is extended to 60 days). You will report a 'QE' through ESS (employee self-serve). Just click on the 'benefits' icon and then the link provided at the top of the page. Select the appropriate qualifying event from the drop-down box and enter the event date. Send your supporting documentation to the Employee Benefits Dept.; when your event has been approved you will receive an email with a link to allow you to make your changes. *Note: the changes you make must align with the event you are reporting, EX: if your spouse loses his/her medical, the only change you can make is to add him/her to your medical, the QE does not allow you to also add vision or dental benefits, likewise, it doesn't permit you to add other dependents unless those dependents were also impacted by the spouse's loss of coverage or have their own qualifying event.*

Pre-Tax Deductions: Clermont County participates in Section 125 of the Cafeteria plan under the IRS. Section 125 permits you to pay for medical, dental, vision, flexible spending accounts and health savings accounts with 'pre-tax' dollars, effectively lowering the amount of income tax you will pay. Section 125 rules prohibit any change to pre-tax elections during the plan year except in the case of a QE (qualifying event) – the only cafeteria 125 plan that is permitted to be changed without a QE is the HSA (health savings account).
Note: Voluntary benefits are not pre-tax benefits and can be dropped or decreased at any time.

When Coverage Ends: All health and life insurance benefits will end on the last day of the month in which you terminate county employment, retire, or become ineligible for benefits. Dependent coverage will end on the day of the event when the event is divorce, legal separation or death of dependent; dependent coverage for all other QE's will end on the last day of the month in which the dependent becomes ineligible for coverage.

HEALTHCARE BENEFITS

Keeping healthcare costs in check while still providing good coverage is a struggle for most employers in the USA today. Funding for government entities has additional disadvantages when compared to private employers, mainly because 'for profit' businesses can simply increase the cost of their product to cover their operating costs, including wages and benefits. Government entities contain no 'profit-centers' and must budget based solely on expected income from taxes, federal & state funding, grants, etc. so funding for fringe benefits must be contained as much as possible.

2016 MEDICAL EMPLOYEE PAYROLL DEDUCTIONS *(2x per month):*

NPOS-Copay (Per Pay):	County Benefit Credit	Employee Share		Discount Applied	
		Standard Rate	With Physical Discount		
SINGLE	$ 224.29	$ 37.63	$ 32.63	$ 5.00	
EE + CHILDREN	$ 357.46	$ 97.17	$ 92.17	$ 5.00	
EE + SPOUSE*	$ 428.93	$ 120.60	$ 110.60	$ 10.00**	***Requires Physical form for both Emp. & Spouse***
FAMILY*	$ 694.40	$ 163.46	$ 153.46	$ 10.00**	
CDHP (Per Pay):	**County Benefit Credit**	**Employee Share**		**Discount Applied**	**County HSA Contribution**
		Standard Rate	**With Physical Discount**		
SINGLE	$ 181.62	$ 26.76	$ 21.76	$ 5.00	**$25.00**
EE + CHILDREN	$ 290.08	$ 70.85	$ 65.85	$ 5.00	**$50.00**
EE + SPOUSE*	$ 348.09	$ 89.01	$ 79.01	$ 10.00**	**$50.00**
FAMILY*	$ 563.10	$ 118.06	$ 108.06	$ 10.00**	**$50.00**

FOR 2017: **YOU CAN EARN A BENEFIT CREDIT TOWARD THE COST OF YOUR 2017 MEDICAL COVERAGE!!** Just have a routine physical & blood test by **Oct. 31, 2016** – Submit your completed form to the Benefits Office & receive: **$10 PER MONTH** *(single or emp+child plans)* or **$20 PER MONTH** *(emp+spouse or family plans – both emp & spouse must participate)* credit toward the cost of your 2017 medical plans. Call Benefits Office for details: 732-7981

SPOUSAL COVERAGE: A spousal surcharge of $25.00 per pay will be applied to employees who elect spousal coverage through the county when the spouse has coverage available through their own employer.

MEDICAL COVERAGE - HUMANA

Your health and the health of your family are important and we recognize that families have different needs and priorities that's why Clermont County offers two excellent medical plans to choose from, both designed to help you budget while allowing you and your dependents to obtain the care you need, when and where you need it.

NPOS CO-PAY Plan: This is a 'traditional' copay plan which has set percentage fees for in-network office visits, prescription drugs, etc., and allows you to decide where you'll go for treatment. Utilizing in-network providers will give you the best value for your money. You can choose to pair this plan with a healthcare Flexible Spending Account (FSA) which will allow you to set aside a portion of your paycheck, pre-tax, to cover the cost of your out-of-pocket medical, dental and vision expenses.

CDHP (Consumer Driven Healthcare Plan): The CDHP has lower per pay deductions when compared to the NPOS Copay plan. It is a plan that can easily be budgeted for - the most you would have to pay out of pocket in a single year is $2,600 for one person and $5,200 for the entire family. Its best feature is that it is paired with a Health Savings Account (HSA) which is partially funded by the County and that employees can deposit funds into. Participants can also elect a **Limited** FSA.

We encourage you to review the SBC's and Plan Summaries for each plan: www.myhumana.com

Medical Plan Comparison Charts:

	NPOS – Copay Plan		CDHP w/Optional HSA Plan	
	In-Network	**Out-of-Network**	**In-Network**	**Out-of-Network**
Preventative Care:	**Plan Pays 100%**	60% after deductible	**Plan Pays 100%**	70% after deductible
Deductible:	**$1000 Single** **$2000 Family**	$2000 Single $4000 Family	**$2600 Single** **$5200 Family**	$5200 Single $10400 Family
Coinsurance: (After Deductible)	**Plan Pays 80%** **You Pay 20%**	Plan Pays 60% You Pay 40%	**Plan Pays 100%** **After deductible is met.**	70% after deductible
Office Visit Co-Pays:	**$20 Primary care** **$40 Specialist**	70% after deductible	**Plan Pays 100%** **After deductible is met.**	70% after deductible
Medical Out Of Pocket Maximum: (including deductible)	**$3000 Single** **$6000 Family**	$6000 Single $12000 Family	**$2600 Single** **$5200 Family**	$5000 Single $10000 Family
Rx (pharmacy):	**Copays:** **$10/$30/$50/25%**	70% after co-pay.	**Plan pays 100% after deductible is met.**	100% after deductible is met.
Rx Out of Pocket Maximum:	**$3500 per person** **$7000 per family**	n/a		
Behavioral Health				
Inpatient Covered Services:	**Plan Pays 80% after deductible**	60% after deductible	**Plan pays 100% after deductible is met.**	70% after deductible
Outpatient & office therapy:	**100% after $40 copay**	60% after deductible		

Dental Plan	Per Pay Deductions
SINGLE	$12.71
EE + CHILDREN	$35.01
EE + SPOUSE	$32.24
FAMILY	$39.09

Vision Plan	Per Pay Deductions
SINGLE	$2.97
EE + CHILDREN	$6.91
EE + SPOUSE	$6.60
FAMILY	$8.08

DENTAL INSURANCE – DENTAL CARE PLUS*

This is an in-network only plan. There are over 1,000 DCP providers in the Greater Cincinnati area to choose from. Plan details are posted on the county's HR web page and will also be included with your ID card or visit: www.dentalcareplus.com

Maximum Benefit Per Year:	$1,000 per member
Preventative Benefits: Cleanings; Routine X-rays, etc.	Plan pays 100%
Basic Benefits: Diagnostics; Extractions; Periodontics; Endodontic, etc.	Plan pays 80%
Major Benefits: Oral Surgery; Prosthodontic; Restorative; etc.	Plan pays 50%

VISION INSURANCE – EYEMED*

Below is a general outline of the in-network benefits available. Plan details are posted on the county's HR web page and will also be included with your ID card or visit: www.eyemedvisioncare.com

Annual Exam with Dilation:	$10 copay
Standard Plastic or Polycarbonate Lens:	$25 copay
Standard Progressive Lens:	$90 copay
Frames: (1 every 24 months):	Plan pays up to $120; Plan pays 20% of cost over $120
Contact Lens: Conventional: Disposable: Medically Necessary:	Plan pays $120 + 15% of bal. Plan pays $120 Plan pays 100%

***DJFS Bargaining employees are not eligible for these benefits. See your Union Rep for AFSCME details.**

HSA's (Health Savings Accounts) and FSA's (Flexible Spending Accounts) – How can they benefit you?

Even the most comprehensive benefit plans do not cover all expenses. Participation in one or more of these accounts will allow you to set aside some of your income on a pre-tax basis to pay for healthcare and/or daycare expenses not covered by your other benefit plans. **Here's how they work:** The amount you contribute to one or both of these accounts is deducted from your paycheck before federal, state and local taxes are withheld; income tax is then calculated only on the balance remaining. By participating in this type of plan, not only do you reduce your taxable income, but you also have money readily available to pay healthcare and/or dependent care expenses using tax free dollars.

FLEXIBLE SPENDING ACCOUNTS (FSA)

Healthcare Accounts allow you to save for expenses not covered by your benefit plans, including: deductibles, copays, orthodontics, etc. The maximum annual contribution is $2,550. Unused funds up to $500 can be "rolled over" for use in the following year; the $500 does not accumulate from year to year; unused funds in excess of $500 are forfeited. Claims must be submitted by March 31st of the following year to be paid. Once elected, payroll contributions cannot be changed until the following year, so be careful not to over contribute!!

IMPORTANT: If your or your spouse has an active HSA, you can only elect a Limited FSA

Dependent Care Account allows you to save for daycare services for children under the age of 13 and/or a disabled child, spouse or parent, while you work. Funds can be used for daycare, pre-school, summer day camp and elder care. The annual maximum contribution is $5,000 per family. Funds for daycare must be in the account before you can access them. Unused funds at the end of the calendar year are forfeited.

'Benny' Debit Card: The 'Benny Card' is a MasterCard debit card, provided at no cost to you, that allows you to access the funds in your account. You can also choose to file paper claims.

Open Enrollment: Only new participants will receive a 'Benny' debit card. Existing debit cards will be 'recharged' on the first day of January each year that you re-enroll. A $10 per card charge applies for lost or additional cards.

Contact Chard-Snyder to order a replacement: 513-459-9997

Termination: Funds in your FSA can be claimed for up to 30 days from the last day of the month in which your employment ends – claims must have occurred prior to date of termination. Any funds remaining after 30 days are forfeited.

HEALTH SAVINGS ACCOUNTS (HSA)

To participate in the HSA, you must elect the CDHP medical plan. The HSA is similar to the Healthcare FSA, in that it is a vehicle that you can use to save money on a pre-tax basis for out of pocket expenses for medical, dental and vision care. However, there are also significant differences:

- Employees enrolled in the single CDHP medical plan can save up to $3,350; all other tiers can save up to $6,750.
- You can change your payroll contribution at any time.
- If you are over age 55, you can save an additional $1,000 per year.
- **Employees enrolled in Medicare are not eligible for the HSA**
- **If your spouse has a 'full' FSA, you cannot deposit funds into an HSA.**
- The funds rollover year to year and have unlimited accrual so you can save for future medical, dental and vision expenses.
- When you leave employment, your funds go with you.
- The funds draw interest if they remain in your account.
- There are some investment opportunities once you have a specific amount saved in your account.
- If you move from the CDHP to the Copay Plan or if you waive coverage during open enrollment, you can still access funds already in the account, but you cannot make any further contributions.

NOTE: *Employees electing the HSA must complete the Park National Bank application and take it to a Park National Bank location or forward it to the Employee Benefits Coordinator with a copy of their driver's license.*

TWO NEW VOLUNTARY BENEFITS FOR 2016!!!

Seeking to help employees cover rising out-of-pocket costs, Clermont County has contracted with Trustmark & Allstate to offer policies for accident, critical illness and caner insurance. Both policies pay cash benefits directly to the employee and other covered family members. Both are offered at group rates that compare favorably to what you would pay if you were buying these policies on the open market.

Critical Illness & Cancer Supplemental Coverage:
Focus on such illnesses as coronary heart disease, stroke, cancer or other unexpected illnesses that can lead to both prolonged absence from work and high out-of-pockets costs.

Accident Insurance:
Accident Insurance is supplemental coverage which will help cover unexpected costs due to injuries suffered as a result of an accident.

These plans provide a relatively inexpensive way to provide yourself with some security in the event that you or a covered family member suffers a critical illness or accident.

The actual cost for these plans will vary depending upon many factors so enrollment for these benefits will not be through MUNIS or ESS. To obtain plan information and the relevant rates you will meet with a representative of the Star Robbins & Company either during a one-on-one meeting held at a location in the county: https://clermontcounty.youcanbook.me/. Password: CC2016

Or via a telephonic enrollment call: 1-800-486-7721

To obtain more information regarding these plans, view the brochures at:

www.oe.clermontcountyohio.gov

EMPLOYEE LIFE & AD&D INSURANCE*

Basic Employee Life & AD&D Coverage:
As a full-time Clermont County employee, you automatically receive $25,000 in basic life insurance and an additional $25,000 in AD&D coverage (accidental death & dismemberment), at no cost to you.
***Does not apply to CCDD employees – see your personnel dept. for details of your life insurance plan.**

Employee Voluntary Life and AD&D Coverage:

In addition to the County provided life insurance, you can elect to enroll in the voluntary life & AD&D plan. The cost is based on your age and the level of coverage you elect. Coverage is available in $10,000 increments up to 5x your annual salary, not to exceed $250,000. You are guaranteed coverage of up to $150,000 (but not more than 5x annual salary) if you elect coverage when you first become eligible for benefits. **Any amount over $150,000 must be approved by the insurance carrier** *(see the "EOI" section below for details)*. To determine the level of coverage and the associated cost see the "rate sheet" posted on the county's HR web page: www.oe.clermontcountyohio.gov.

DEPENDENT LIFE & AD&D INSURANCE

If you elect voluntary employee life insurance through Clermont County, you also have the option to purchase coverage for your spouse and/or dependent children (up to age 19, or 25 if a full time student).

Voluntary Spouse Life & AD&D Coverage: Coverage is available in increments of $10,000 up to a maximum of $100,000. The cost is based on your spouse's age and level of coverage elected. Your spouse is guaranteed coverage of up to $50,000 (but not more than your coverage) if you elect coverage when you first become eligible for benefits. **Amounts over $50,000 must be approved by the insurance carrier** *(see the "EOI" section below for details)*.

Child Life & AD&D Coverage: Coverage is available in $5,000 increments up to a maximum of $20,000. The plan uses a flat rate and one policy covers all **eligible** children…. Ex: $10,000 Child Life is $ .60 per pay regardless of age and whether you are covering one child or multiple children**. Eligibility rules apply, please see the eligibility page.**

GI (GUARANTEED ISSUE) AMOUNT

If electing voluntary life coverage when you first become eligible for benefits, medical information (EOI) is not required unless electing more than the 'GI' amounts listed below:

- Employee: up to 5x annual salary, but not more than $150,000.
- Spouse: up to $50,000, but not more than the employee's coverage.
- Eligible Children: up to $20,000, but not more than the employee's coverage.

EOI FORM (EVIDENCE OF INSURABILITY)

You can apply for coverage beyond the "GI" amounts listed above by submitting an EOI form. The EOI form must be approved by the insurance carrier before the coverage will be effective. The limits for coverage with an approved EOI are as follows: up to $250,000 (but not more than 5x annual salary) for employee; and up to $100,000 for spouse (cannot be more than employee's coverage). An EOI form is required for any level of coverage if you are a "late enrollee" (late enrollee is someone who requests coverage at any time other than when newly eligible for benefits). Submit completed form to the Employee Benefits Coordinator, HR.

PERMITTED VOLUNTARY LIFE INSURANCE CHANGES DURING THE 2016 OPEN ENROLLMENT PERIOD

Current Participants:
You can increase your employee and spouse coverage by up to $20,000* but not more than the "GI" amount *(see GI amount above).* For coverage over the "GI" amounts please contact the Benefits Office.

New Coverage:
If you would like voluntary life but did not initially elect it, **this year only**: you can elect up to $20,000 for yourself, spouse and/or children*. For coverage over $20,000 contact the Benefits Office.

NOTE: You cannot elect more voluntary life coverage for your spouse and/or children than you carry on yourself & eligibility rules apply.

LONG TERM DISABILITY INSURANCE (LTD)

Clermont County provides you with LTD insurance until you have 5 years of OPERS service. The plan pays after 182 days of a qualifying illness; the plan pays 60% of your gross monthly pay up to a maximum of $5,000 per month. Employees with 5 or more years of service may qualify for a similar benefit through the Ohio Public Employees Retirement System.

VOLUNTARY SHORT TERM & LONG TERM DISABILITY PLANS

Clermont also offers voluntary STD & LTD insurance plans:
Option 1: STD coverage that pays after the 30th day of a qualified disability for up to 6 months per occurrence.
Option 2: LTD coverage begins after 180 days of a qualified disability for up to a period of 2 years.

For information and rates, call the provider: 513-842-0725

VACATION

Vacation leave accrual is based on years of service and work schedule. An employee who works 40 hours per week and has 7 or fewer years of employment will accrue at the rate of 3.0769 40 hours per anniversary year; whereas an employee who works 35 hours per week will receive 70 hours vacation after one year of service then begin accruing of 70 hours per anniversary year. The accrual increases after 8, 15 and 25 years of service.

Years of Service	Rate of Accrual per 80 hours worked	Examples: (Based on a 40 hr. / 5 day week)
1 - 7 Years:	3.0769 hrs	10 – 8 hr days
8 - 14 Years:	4.6154 hrs	15 – 8 hr days
15 - 24 Years:	6.1538 hrs	20 – 8 hr days
25+ Years:	7.6923 hrs	25 – 8 hr days

HOLIDAYS*

BCC Full-time employees are entitled to ten paid holidays per year. Due to the nature of some County services your position may require you to work on holidays; however, you will be compensated for working the holiday either with comp time or in monetary form.

Board of County Commissioners Observed holidays are:

- New Year's Day
- Martin Luther King, Jr. Day
- Presidents' Day
- Memorial Day
- Independence Day
- Labor Day
- Veteran's Day
- Thanksgiving Day
- Friday after Thanksgiving
- Christmas Day

PERSONAL DAY*

Full-time employees are entitled to one personal day (8 hours) per year, awarded on January 1st. This day must be used by the end of the calendar year. If you are on probation as of January 1, you will be awarded eight hours of personal leave when you successfully complete probation.

EARNED PERSONAL DAY*

Full-time employees, who work 182 days (six months) without using any sick leave, will receive one 8 hour 'earned personal day'. You may receive up to two earned personal days per year. Earned personal days must be used within one calendar year of the issue date.

SICK LEAVE

Full-time employees receive up to fifteen days of sick leave per year (12 months) this leave is accrued at 4.6 hours per 80 hours worked. Part-time employees receive sick leave at a reduced amount based on hours worked. Unused sick leave can be carried over to the next year up to an unlimited number of hours.

LEAVE DONATION*

- An employee who has an extended period of absence for a serious personal illness or to assist a seriously ill immediate family member and has exhausted all available paid leave, maybe eligible to receive voluntarily donated leave from co-workers based on the 'County Leave Donation' policy.
- Only employees who have over 240 hours accrued may donate and the donation must be approved.
- There are limitations to the Leave Donation policy such as the donation cannot crossover from one elected official's organization to another.
- See the Leave Donation Policy for complete details.

OTHER LEAVE*

- Election Day paid leave for poll workers is available to non-bargaining employees (with department head's approval). If you volunteer as a poll worker on election day you would be paid your regular wages for that day without having to take sick, vacation or comp time. You will also receive the poll worker compensation.
- Clermont County also has military, jury and personal leave allowances.
- Unpaid Leave - Personal, Education, Family and/or Medical
- Check the policies for individual situations.

FAMILY MEDICAL LEAVE ACT:

- Clermont County complies with the federally mandated "Family Medical Leave Act" also known as FMLA.
- FMLA is a protected leave which provides you with job security for up to 12 weeks should you find it necessary to take a qualified personal or family medical leave.
- FMLA is only paid time off if you also have sick, vacation, personal, earned personal or comp time available – otherwise it is unpaid leave.
- To be eligible you must have at least one year of employment with Clermont County and at least 1250 hours worked (equates to about 24 hours per week) within the 12 months immediately prior to taking FMLA protected leave.
- To ensure you are protected complete and return all necessary documentation within the allotted time frame.

***These are standard benefits for BCC employees; DJFS employees and employees of other Elected Officials may have different leave schedules – please see your personnel manager or your supervisor for details.**

EMPLOYEE ASSISTANCE PROGRAM (EAP)

Counseling services (up to 5 visits per year) provided to Clermont County employees and their immediate family members through Tri-Health Services – paid by Clermont County. These services are 100% confidential; no identifiable information is forwarded to your employer. CONCERN is staffed by trained professional. Services include:

- Personal & Mental Health
- Grief Counseling
- Work Related Issues
- Conflict Resolution
- Anger Management
- Drug, gambling, alcohol addictions
- Retirement Planning
- Locating Dependent Care
- Personal and Group Help Available

TUITION ASSISTANCE PROGRAM

- After the successful completion of your probationary period and with the approval of your manager, you can apply for tuition assistance toward the cost your education provided the classes relate to your position at Clermont County.
- The annual limit is $2,000 and comes with a $50 per month work commitment.
- Basically this means for every $50 you receive, you are expected to work one month – ex: if your reimbursement is $250, your work commitment would be 5 months.
- The percentage paid is based on your grade (up to $2000 Reimbursed per year): A = 75% B = 65% C = 60%
- See the "Tuition Assistance Policy" for complete details.

RETIREMENT

PUBLIC EMPLOYEES RETIREMENT SYSTEM (OPERS)

As a County employee, you will participate in the Ohio Public Employees Retirement System (OPERS) in lieu of Social Security. Information will be sent to you directly from OPERS within your first three months of employment. The information package will explain in detail the benefits and the election options available, the timeline and how to elect.

Note: Prior service in the public sector, including military service, may qualify towards your applied service time. If you have public service within Ohio or with the military, contact OPERS directly at 800-222-7377 or www.opers.org;

Contact the Payroll Office at 732-8103 for additional details.

DEFERRED COMPENSATION PLANS

In addition to OPERS, the County offers access to participation in deferred compensation plans. These plans allow you to set aside a portion of your income on a pre-tax basis to supplement your retirement benefits. The three available plans (listed below) offer you investment options, such as a fixed rate of return, variable annuity and mutual fund plans.

1. **Ohio Public Employees Deferred Compensation Program (OPEDC) 1-877-644-6457**
   Email: BugherT@Nationwide.com
2. **County Commissioners Association of Ohio (CCAO / CCADC) 1-614-220-0652**
   Rachel.Willoughby@empower.retirement.com
3. **International/Inter City/County Management Association (ICMA) 1-866-339-8796**
   Email: YBailey@icmarc.org

WORKERS' COMPENSATION / WAGE CONTINUATION

- Workers Comp: The County provides coverage through the Bureau of Workers Comp. This coverage can provide compensation benefits in the event you suffer a compensable on-the-job injury or suffer from an occupational illness directly related to your occupation.
- Wage Continuation: This is an alternative to temporary total compensation offered by the Bureau of Workers Compensation. You may apply to receive disability benefits up to a maximum period of twelve weeks.

COBRA RIGHTS

The County uses COBRA Administrator Services with P&A Group. P&A Group will send out all notifications of your COBRA Rights and the COBRA Rights of your covered dependents within 30 days of your enrollment or coverage changes with the county's healthcare plans. An electronic copy is also provided in the enrollment system when you elect your benefits.
The COBRA Initial Rights document is also posted on the County's Human Resources web page and is published in the medical summary plan description documents. If you have questions regarding COBRA coverage, please contact the Benefits Office: 732-7981.

At the end of your employment a COBRA Enrollment package will be mailed to your home within 45 days of notification or date of termination, whichever date is the latest) to the Benefits Office that you have a qualifying change in your employment (termination, retirement or reduction of hours) or within 45 days of notification that a covered dependent is no longer eligible for coverage.